Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance Board Members

November 2021

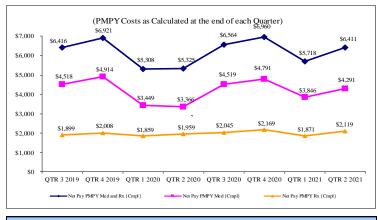
DASHBOARD REPORT: BASED ON INCURRED CLAIMS THROUGH JUNE 2021

Includes Projections for Incurred, but Not Yet Reported (IBNR)

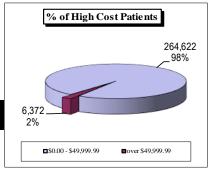
Enrollment

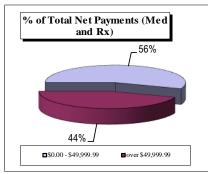
Fact	Jul 2019 - Jun 2020	Jul 2020 - Jun 2021	% Change
Employees Avg Med	142,773	140,455	-1.62%
Members Avg Med	264,352	262,415	-0.73%
Family Size Avg	1.9	1.9	0.90%
Member Age Avg	36.6	36.6	-0.14%

Net Incurred Claims Cost per Member



High Cost Claimants Jul 2020—Jun 2021

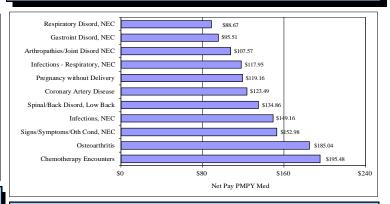




Prescription Drug Programs

	Fact	Jul 2019 - Jun 2020	Jul 2020 - Jun 2021	% Changa
				Change
Mail Order	Discount Off AWP % Rx	55.04%	54.42%	-1.13%
	Scripts Generic Efficiency Rx	98.31%	98.64%	0.33%
Retail	Discount Off AWP % Rx	45.99%	43.69%	-5.02%
	Scripts Generic Efficiency Rx	98.35%	98.05%	-0.30%
Total	Discount Off AWP % Rx	49.63%	48.34%	-2.60%
	Scripts Generic Efficiency Rx	98.34%	98.21%	-0.14%
	Scripts Maint Rx % Mail Order	27.79%	31.24%	12.42%

Top 10 Clinical Conditions



Allowed Claims Costs PMPY with Norms

	Jul 2019 - Jun 2020	Jul 2020 - Jun 2021	% Change	Recent US Norm	Comp to Norm
Allow Amt PMPY Med {Cmpl}	\$4,858.84	\$5,235.02	8%	\$5,444.02	-3.99%
Allow Amt PMPY IP Acute {Cmpl}	\$1,315.16	\$1,325.76	1%	N/A	N/A
Allow Amt PMPY OP Med {Cmpl}	\$3,530.46	\$3,899.00	10%	\$3,908.65	-0.25%
Allow Amt PMPY OP Fac Med {Cmpl}	\$2,012.63	\$2,236.13	11%	N/A	N/A
Allow Amt PMPY Office Med {Cmpl}	\$973.67	\$1,032.01	6%	N/A	N/A
Allow Amt PMPY OP Lab {Cmpl}	\$221.27	\$286.35	29%	N/A	N/A
Allow Amt PMPY OP Rad {Cmpl}	\$470.51	\$521.61	11%	N/A	N/A
Out of Pocket PMPY Med {Cmpl}	\$770.00	\$845.82	10%	\$834.01	1.40%
Allow Amt PMPY Rx {Cmpl}	\$2,159.32	\$2,286.88	6%	\$1,543.36	32.51%
Out of Pocket PMPY Rx {Cmpl}	\$222.03	\$232.10	5%	\$0.00	N/A

Cost Drivers Support

Fact	Jul 2019 - Jun 2020	Jul 2020 - Jun 2021	% Change
Allow Amt Per Day Adm Acute	\$5,079.80	\$4,977.18	-2.02%
Days Per 1000 Adm Acute	256.72	261.73	1.95%
Allow Amt Per Visit OP Fac Med	\$1,595.03	\$1,476.28	-7.45%
Visits Per 1000 OP Fac Med	1,262.07	1,503.61	19.14%
Allow Amt Per Visit Office Med	\$123.48	\$121.30	-1.76%
Visits Per 1000 Office Med	7,884.68	8,452.68	7.20%
Allow Amt Per Day Supply Rx	\$3.54	\$3.73	5.25%
Days Supply PMPY Rx	609.65	613.42	0.62%

Cost Drivers—Utilization and Price Trends

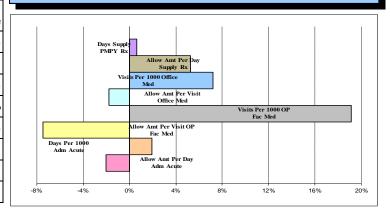


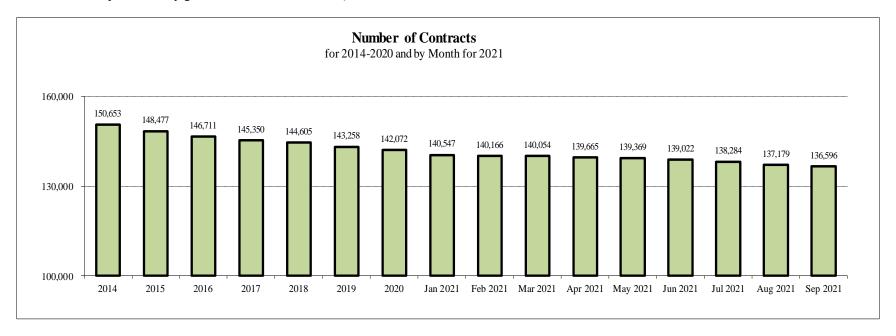
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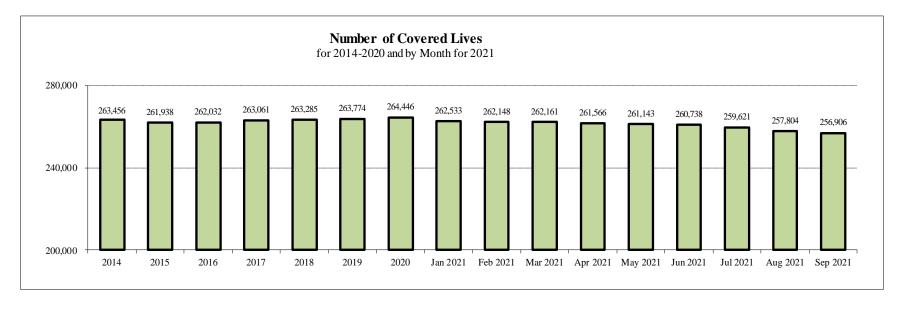
Paid data as of: September 2021 Incurred data as of: June 2021

Enrollment

The following chart shows planholder enrollment (contracts) for 2014-2020 and monthly year-to-date for 2021. Enrollment will fluctuate on a monthly basis. (Approximately 7,000 Cross-Reference spouses in any given month are not included.)

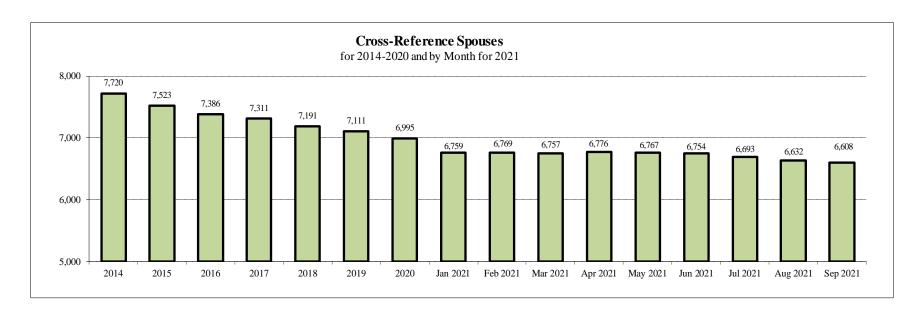


The following chart shows member enrollment (covered lives) for 2014-2020 and monthly year-to-date for 2021. Enrollment will fluctuate on a monthly basis.



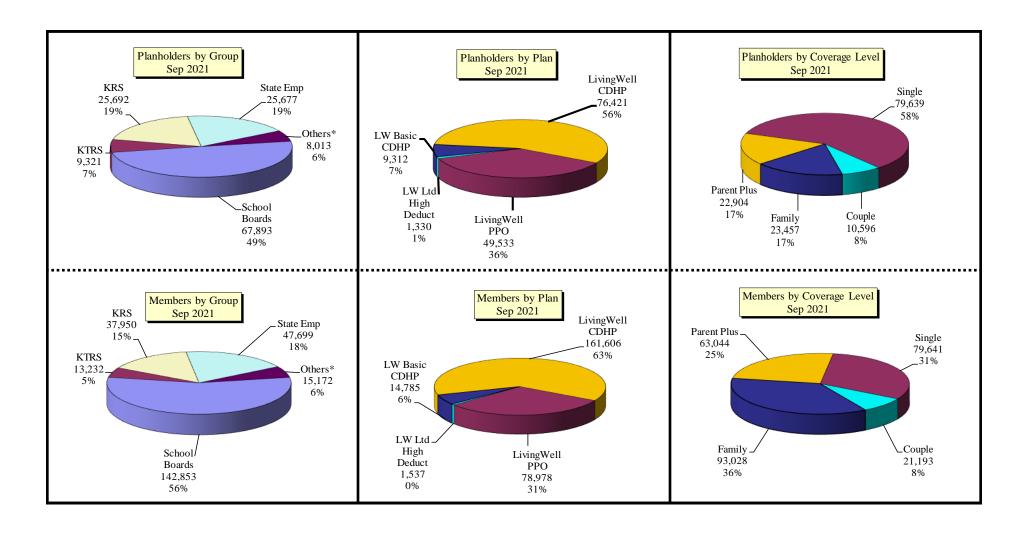
Enrollment (continued)

The following graph shows the number of Cross-Reference Spouses for 2014-2020 and monthly year-to-date for 2021. The number of Cross-Reference Spouses will fluctuate on a monthly basis.



Enrollment (continued)

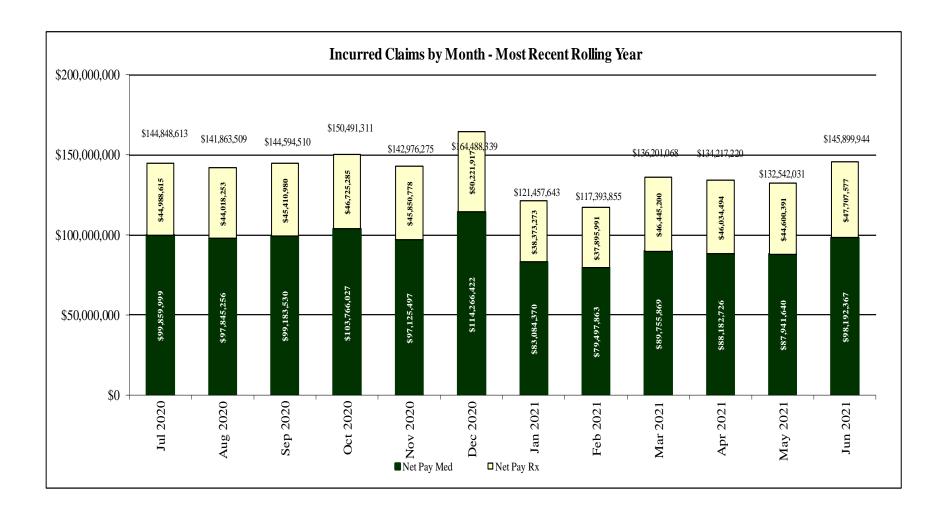
The following charts show Planholder and Member enrollment by Group, Health Plan, and Coverage Level.



^{*} Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Incurred Medical and Pharmacy (Rx) Claims Cost for the most recent rolling year.



Claims Costs (continued)

The following table represents Incurred Medical Claims by Group for 2014-2020 and monthly year-to-date for 2021.

	INCURRED MEDICAL CLAIMS BY GROUP										
Time Period	School Boards	KTRS	KRS	State Employees	Others*	Totals					
2014	\$465,112,511	\$121,029,097	\$216,483,334	\$202,992,249	\$80,366,825	\$1,085,984,016					
2015	\$406,274,265	\$100,740,841	\$189,171,718	\$159,515,036	\$62,699,633	\$918,401,495					
2016	\$435,740,756	\$101,146,437	\$194,916,035	\$172,375,342	\$59,493,914	\$963,672,484					
2017	\$455,191,695	\$95,513,039	\$197,611,708	\$177,397,741	\$61,172,947	\$986,887,130					
2018	\$483,291,732	\$99,732,631	\$212,711,680	\$186,782,547	\$65,084,385	\$1,047,602,976					
2019	\$538,680,383	\$104,179,515	\$225,702,369	\$200,179,894	\$71,291,243	\$1,140,033,404					
2020	\$506,336,437	\$95,196,383	\$211,470,127	\$181,359,756	\$70,531,664	\$1,064,894,367					
Jan 2021	\$39,220,391	\$7,878,962	\$16,217,510	\$13,690,229	\$6,077,278	\$83,084,370					
Feb 2021	\$37,423,165	\$7,083,287	\$14,285,495	\$15,315,942	\$5,389,975	\$79,497,863					
Mar 2021	\$42,207,147	\$7,046,395	\$18,599,558	\$16,371,704	\$5,531,066	\$89,755,869					
Apr 2021	\$41,471,871	\$7,209,273	\$17,627,218	\$15,657,354	\$6,217,011	\$88,182,726					
May 2021	\$41,225,836	\$7,748,873	\$16,696,676	\$16,455,998	\$5,814,259	\$87,941,640					
Jun 2021	\$50,937,281	\$7,422,304	\$16,153,169	\$16,697,470	\$6,982,144	\$98,192,367					

^{*} Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs (continued)

The following table represents Incurred Pharmacy Claims by Group for 2014-2020 and monthly year-to-date for 2021.

	INCURRED RX CLAIMS BY GROUP										
Time Period	School Boards	KTRS	KRS	State Employees	Others*	Totals					
2014	\$131,098,426	\$43,053,078	\$73,830,755	\$55,751,835	\$20,884,223	\$324,618,317					
2015	\$128,985,096	\$42,244,335	\$74,179,491	\$56,345,078	\$21,644,747	\$323,398,746					
2016	\$150,206,049	\$44,006,471	\$82,345,637	\$62,097,368	\$23,887,655	\$362,543,182					
2017	\$169,448,080	\$46,569,409	\$89,294,930	\$68,690,782	\$25,682,152	\$399,685,354					
2018	\$188,865,977	\$48,505,632	\$98,922,301	\$74,050,016	\$28,077,054	\$438,420,980					
2019	\$213,197,309	\$50,389,789	\$110,090,519	\$83,760,248	\$31,881,007	\$489,318,872					
2020	\$236,150,791	\$52,174,591	\$117,525,473	\$90,431,981	\$34,636,917	\$530,919,753					
Jan 2021	\$17,114,563	\$3,687,228	\$8,566,563	\$6,553,256	\$2,451,664	\$38,373,273					
Feb 2021	\$16,960,324	\$3,478,374	\$8,559,693	\$6,398,655	\$2,498,944	\$37,895,991					
Mar 2021	\$20,848,730	\$4,333,951	\$10,236,269	\$7,919,366	\$3,106,883	\$46,445,200					
Apr 2021	\$20,580,481	\$4,105,843	\$10,304,143	\$8,034,525	\$3,009,503	\$46,034,494					
May 2021	\$20,269,609	\$3,778,779	\$9,841,725	\$7,703,188	\$3,007,089	\$44,600,391					
Jun 2021	\$21,845,144	\$4,377,268	\$10,147,317	\$8,226,445	\$3,111,403	\$47,707,577					

^{*} Others include COBRA, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

<u>Claims Costs</u> (continued)
The following table represents Incurred Medical Claims by Health Plan for 2014-2020 and monthly year-to-date for 2021.

	INCURRED MEDICAL CLAIMS BY PLAN										
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing*	Total			
2014	\$57,385,008	\$46,095,825	\$598,724,084	\$375,470,631	\$0	\$0	\$8,215,648	\$1,085,986,030			
2015	\$44,667,793	\$42,933,513	\$448,976,661	\$376,288,350	\$0	\$0	\$8,215,648	\$921,081,965			
2016	\$53,523,467	\$48,589,204	\$446,510,072	\$408,115,361	\$0	\$0	\$6,842,661	\$963,580,765			
2017	\$66,938,779	\$30,774,775	\$411,835,314	\$472,036,290	\$11,960	\$0	\$5,290,012	\$986,887,130			
2018	\$85,772,056	\$27,242,111	\$407,340,769	\$522,598,074	\$220,447	\$220,447 \$25,858		\$1,047,602,976			
2019	\$8,176	\$1,393	\$447,892,002	\$643,995,485	\$29,905,849	\$13,650,952	\$4,579,546	\$1,140,033,404			
2020	\$0	\$0	\$400,735,438	\$623,500,703	\$27,380,200	\$8,946,086	\$4,331,940	\$1,064,894,367			
Jan 2021	\$0	\$0	\$31,941,578	\$47,680,507	\$1,790,076	\$667,301	\$1,004,908	\$83,084,370			
Feb 2021	\$0	\$0	\$30,716,294	\$46,804,815	\$1,370,667	\$235,668	\$370,419	\$79,497,863			
Mar 2021	\$0	\$0	\$34,121,892	\$52,772,779	\$2,178,051	\$336,758	\$346,388	\$89,755,869			
Apr 2021	\$0	\$0	\$33,385,683	\$51,606,586	\$2,304,908	\$416,073	\$469,477	\$88,182,726			
May 2021	\$0	\$0	\$34,286,416	\$50,507,609	\$2,114,909	\$594,349	\$438,357	\$87,941,640			
Jun 2021	\$0	\$0	\$36,710,670	\$56,985,084	\$3,339,597	\$496,413	\$660,603	\$98,192,367			

^{*} Missing means the claims could not be tagged to a specific Health Plan.

<u>Claims Costs</u> (continued)
The following table represents Incurred Pharmacy Claims by Health Plan for 2014-2020 and monthly year-to-date for 2021.

	INCURRED RX CLAIMS BY PLAN										
Time Period	Standard PPO	Standard CDHP	LivingWell PPO	LivingWell CDHP	LivingWell Basic CDHP	LW Limited High Deductible	Missing**	Total			
2014	\$17,730,754	\$5,829,739	\$217,764,345	\$82,940,511	\$0	\$0	\$352,968	\$324,618,317			
2015	\$16,014,926	\$6,904,578	\$201,586,203	\$98,816,804	\$0	\$0	\$76,235	\$323,398,746			
2016	\$19,014,651	\$7,491,440	\$216,158,709	\$119,656,922	\$0	\$0	\$210,122	\$362,531,844			
2017	\$22,801,969	\$4,760,588	\$217,240,015	\$154,801,085	\$0	\$5	\$81,691	\$399,685,354			
2018	\$32,792,111	\$5,129,223	\$220,318,919	\$180,122,408	\$0	\$0	\$58,319	\$438,420,980			
2019	\$36,488	\$329	\$249,541,542	\$231,042,925	\$5,468,820	\$2,961,407	\$267,361	\$489,318,872			
2020	\$0	\$0	\$268,842,250	\$253,962,123	\$6,034,241	\$1,961,912	\$119,227	\$530,919,753			
Jan 2021	\$0	\$0	\$20,870,741	\$16,885,517	\$398,637	\$188,218	\$30,161	\$38,373,273			
Feb 2021	\$0	\$0	\$19,724,156	\$17,662,303	\$407,571	\$53,450	\$48,512	\$37,895,991			
Mar 2021	\$0	\$0	\$23,900,005	\$21,727,610	\$592,676	\$87,405	\$137,503	\$46,445,200			
Apr 2021	\$0	\$0	\$23,136,706	\$22,255,454	\$485,690	\$66,365	\$90,280	\$46,034,494			
May 2021	\$0	\$0	\$22,132,873	\$21,740,041	\$561,941	\$79,141	\$86,395	\$44,600,391			
Jun 2021	\$0	\$0	\$23,014,430	\$23,861,543	\$631,991	\$99,606	\$100,007	\$47,707,577			

^{**}Missing means the claims could not be tagged to a specific Health Plan.

Claims Costs (continued)

The following represents Incurred Medical Claims by Coverage Level for 2014-2020 and monthly year-to-date for 2021.

	INC	CURRED MEDICA	AL CLAIMS BY (COVERAGE LEV	EL	
Time Period	Couple	Family	Parent Plus	Parent Plus Single		Total
2014	\$131,271,014	\$239,094,807	\$182,552,523	\$524,850,024	\$8,215,648	\$1,085,984,016
2015	\$113,343,648	\$214,227,846	\$156,724,117	\$428,570,705	\$5,535,178	\$918,401,495
2016	\$115,907,167	\$234,282,281	\$158,404,184	\$449,972,099	\$5,020,683	\$963,586,414
2017	\$125,249,301	\$253,489,908	\$160,158,807	\$442,699,103	\$5,290,012	\$986,887,130
2018	\$134,620,915	\$270,273,357	\$170,684,021	\$467,621,020	\$4,403,663	\$1,047,602,976
2019	\$144,995,861	\$301,614,847	\$195,641,977	\$493,201,173	\$4,579,546	\$1,140,033,404
2020	\$141,719,398	\$285,344,816	\$175,621,510	\$457,876,560	\$4,332,083	\$1,064,894,367
Jan 2021	\$10,192,904	\$21,785,689	\$14,428,443	\$35,672,426	\$1,004,908	\$83,084,370
Feb 2021	\$10,814,831	\$22,298,027	\$13,867,164	\$32,147,423	\$370,419	\$79,497,863
Mar 2021	\$11,363,936	\$24,337,710	\$14,976,963	\$38,730,872	\$346,388	\$89,755,869
Apr 2021	\$11,468,019	\$23,604,714	\$14,266,069	\$38,374,448	\$469,477	\$88,182,726
May 2021	\$11,664,346	\$23,124,382	\$14,598,230	\$38,116,324	\$438,357	\$87,941,640
Jun 2021	\$12,319,215	\$25,123,506	\$16,824,539	\$43,264,505	\$660,603	\$98,192,367

^{*}Unable to tag claims to a specific coverage level

Claims Costs (continued)

The following represents Incurred Pharmacy Claims by Coverage Level for 2014-2020 and monthly year-to-date for 2021.

	INCURRED RX CLAIMS BY COVERAGE LEVEL										
Time Period	Couple	Family	Parent Plus	Parent Plus Single		Total					
2014	\$45,477,497	\$67,741,378	\$45,635,023	\$165,451,246	\$313,173	\$324,618,317					
2015	\$42,957,491	\$68,806,053	\$45,211,695	\$166,347,272	\$76,235	\$323,398,746					
2016	\$48,058,582	\$80,398,056	\$49,757,535	\$184,154,432	\$175,199	\$362,543,804					
2017	\$52,795,745	\$92,113,848	\$55,352,719	\$199,341,350	\$81,691	\$399,685,354					
2018	\$55,671,337	\$104,434,142	\$60,725,397	\$217,531,785	\$58,319	\$438,420,980					
2019	\$63,915,521	\$119,154,613	\$70,462,460	\$235,518,917	\$267,361	\$489,318,872					
2020	\$68,950,747	\$132,898,888	\$78,646,493	\$250,304,399	\$119,227	\$530,919,753					
Jan 2021	\$5,055,944	\$9,043,040	\$5,796,666	\$18,447,462	\$30,161	\$38,373,273					
Feb 2021	\$4,960,806	\$9,373,205	\$5,468,789	\$18,044,679	\$48,512	\$37,895,991					
Mar 2021	\$6,130,514	\$11,463,675	\$6,896,962	\$21,816,545	\$137,503	\$46,445,200					
Apr 2021	\$6,317,660	\$11,440,439	\$6,868,189	\$21,317,926	\$90,280	\$46,034,494					
May 2021	\$6,010,133	\$11,342,139	\$6,428,822	\$20,732,902	\$86,395	\$44,600,391					
Jun 2021	\$6,735,830	\$11,985,283	\$7,061,403	\$21,825,054	\$100,007	\$47,707,577					

^{*}Unable to tag claims to a specific coverage level

Medical Claims Utilization

The following is based on Incurred Medical Claims* from Jan—Jun 2021.

Plan	Admits Per 1000 Acute	Admits Per 1000 Acute Rent SGovt	% Diff from Rent SGovt	Days LOS per Admit Acute	Days LOS per Admit Acute Rcnt SGovt			1000 Admits	% Diff from Rent SGovt
LivingWell CDHP	51.11	51.70	-1.16%	4.59	4.57	0.59%	234.80	232.35	1.06%
LivingWell PPO	58.26	54.03	7.83%	5.35	5.08	5.26%	311.81	253.37	23.06%
LW Limited High Deductible	66.68	59.79	11.53%	4.86	5.54	-12.35%	323.88	286.78	12.94%
LivingWell Basic CDHP	29.24	50.08	-41.61%	3.92	4.25	-7.89%	114.58	218.16	-47.48%
Average	52.13	52.37	-0.47%	4.83	4.74	1.95%	251.98	238.28	5.75%

Plan	Visits Per 1000 Office	Visits Per 1000 Office Rent US	% Diff from Rent US	Visits Per 1000 ER	Visits Per 1000 ER Rent US	% Diff from Rent US
LivingWell CDHP	7,947.92	6,868.48	13.58%	166.95	229.83	-37.66%
LivingWell PPO	9,531.01	7,565.52	20.62%	191.00	234.02	-22.53%
LW Limited High Deductible	5,201.18	7,511.56	-44.42%	334.77	233.49	30.25%
LivingWell Basic CDHP	4,902.99	6,604.86	-34.71%	143.69	231.89	-61.38%
Average	8,242.31	7,070.72	14.21%	173.93	231.26	-32.96%

Notes:

Rcnt SGovt— Recent State Government

Rcnt US—Recent US

LOS—Length of Stay

OP—Outpatient

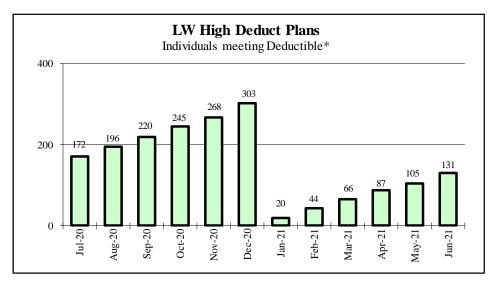
Plan	Svcs Per 1000 OP Lab	Svcs Per 1000 OP Lab Rent US	% Diff from Rent US	Svcs Per 1000 OP Rad	Svcs Per 1000 OP Rad Rent US	%Diff from Rent US
LivingWell CDHP	9,092.73	8,110.25	12.11%	2,227.96	1,977.38	12.67%
LivingWell PPO	11,647.14	9,293.58	25.32%	2,930.73	2,443.99	19.92%
LW Limited High Deductible	9,087.78	9,776.98	-7.05%	2,057.61	2,353.41	-12.57%
LivingWell Basic CDHP	6,184.71	8,103.63	-23.68%	1,423.95	1,897.25	-24.95%
Average	9,708.42	8,482.27	14.46%	2,396.17	2,118.02	13.13%

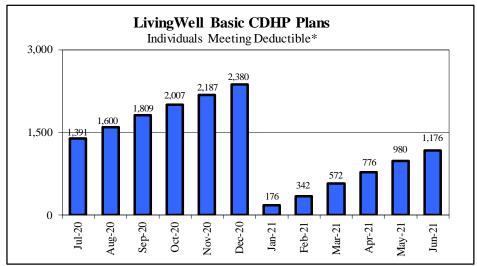
OP Rad—Outpatient Radiology

^{*}Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

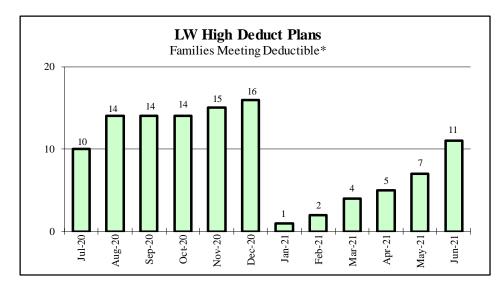
Analysis of Individuals and Families Meeting Their Deductibles

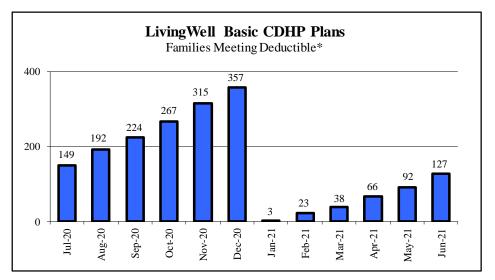
The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.











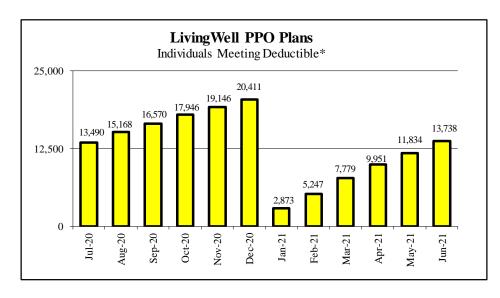
* 2020 and 2021 LivingWell Basic Family deductible is \$3,750

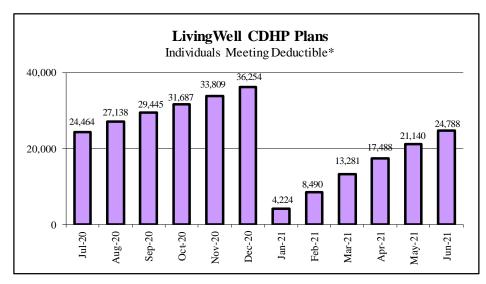
^{* 2020} and 2021 LW High Deduct Individual deductible is \$4,250

^{* 2020} and 2021 LW High Deduct Family deductible is \$8,250

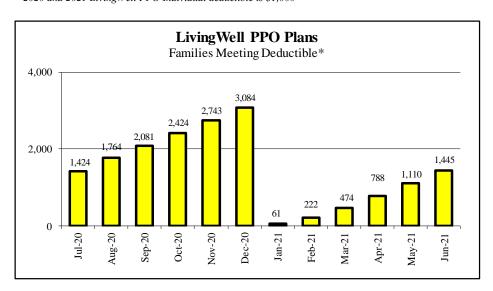
Analysis of Individuals and Families Meeting Their Deductibles (continued)

The following details the number of individuals and families by Health Plan that met their deductible for the latest rolling year. This report is based on Incurred Medical and Pharmacy Claims.

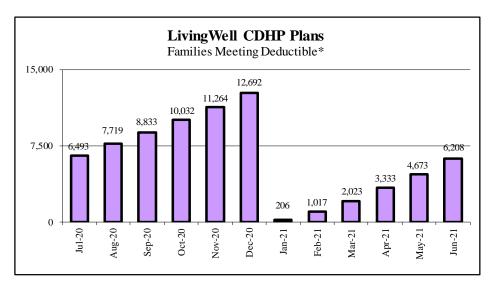




^{*2020} and 2021 LivingWell PPO Individual deductible is \$1,000



* 2020 and 2021 LivingWell CDHP Individual deductible is \$1,500

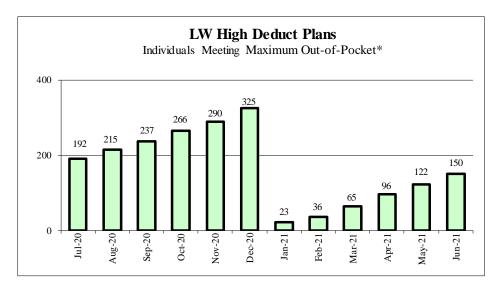


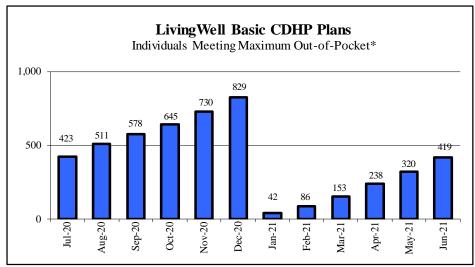
* 2020 and 2021 LivingWell CDHP Family deductible is \$2,750

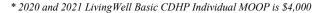
^{* 2020} and 2021 LivingWell PPO Family deductible is \$1,750

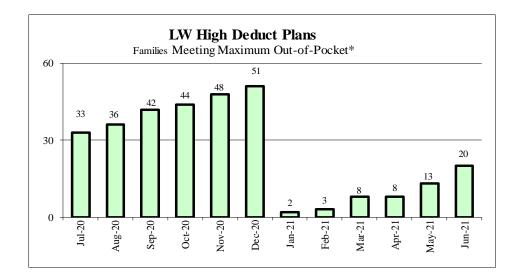
Analysis of Individuals and Families Meeting Their Maximum Out-of-Pocket Expenses

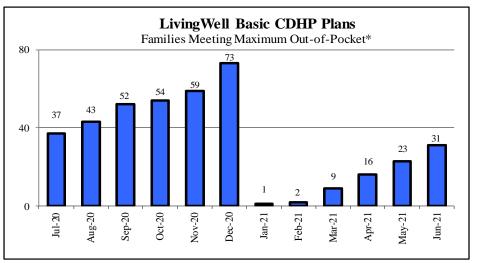
The following details the number of individuals and families by Health Plan that met their maximum out-of-pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.











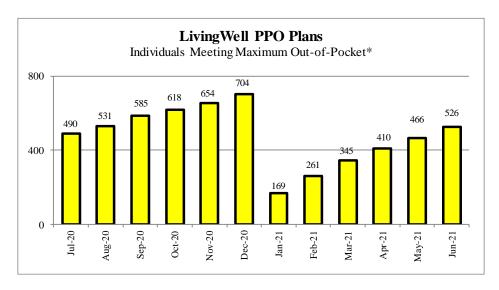
^{* 2020} and 2021 LW High Deduct Individual MOOP is \$5250

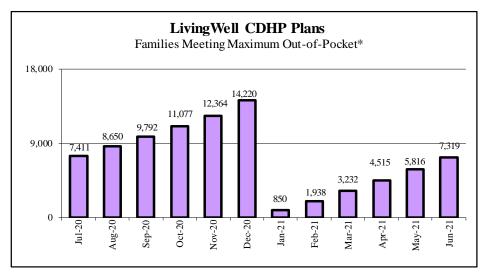
^{* 2020} and 2021 LW High Deduct Family MOOP is \$10,250

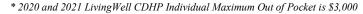
^{* 2020} and 2021 LivingWell Basic CDHP Family MOOP is \$7,750

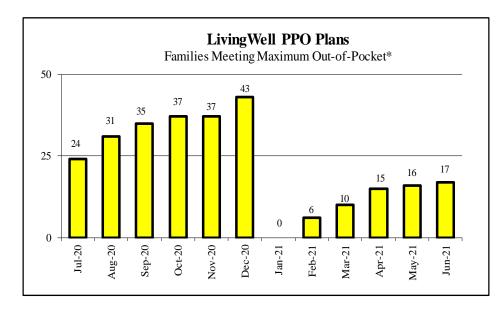
Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses (continued)

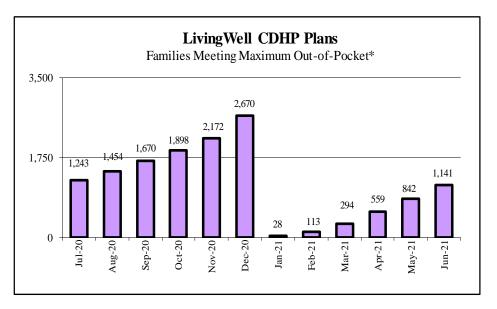
The following details the number of individuals and families by Health Plan that met their maximum out of pocket expense for the latest rolling year. This report is based on Incurred Medical and Pharmacy claims.











^{* 2020} and 2021 LivingWell PPO Individual Maximum Out of Pocket is \$3,000

^{* 2020} and 2021 LivingWell PPO Family Maximum Out of Pocket is \$5,750

^{* 2020} and 2021 LivingWell CDHP Family Maximum Out of Pocket is \$5,750

<u>Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket</u> Expenses

The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2021. This report is based on Incurred Medical and Pharmacy claims.

	Individuals and Families in Standard PPO (2014—2018) and LW High Deduct (2019-Present)												
			Indi	viduals			Fam	ilies					
Plan year	Plan Name	Deductible	Meeting Deductible	MOOP	Meeting MOOP	Deductible	Meeting Deductible	MOOP	Meeting MOOP				
2014	Standard PPO	\$750	34.91%	\$3,500	6.82%	\$1,500	10.68%	\$7,000	0.82%				
2015	Standard PPO	\$750	33.28%	\$3,500	5.31%	\$1,500	9.53%	\$7,000	0.30%				
2016	Standard PPO	\$750	34.21%	\$3,500	5.85%	\$1,500	10.07%	\$7,000	0.39%				
2017	Standard PPO	\$750	35.00%	\$3,750	5.84%	\$1,500	7.06%	\$7,500	0.30%				
2018	Standard PPO	\$750	36.19%	\$3,750	5.91%	\$1,500	7.62%	\$7,500	0.29%				
2019	LW High Deduct	\$4,000	15.50%	\$5,000	15.20%	\$8,000	0.78%	\$10,000	1.68%				
2020	LW High Deduct	\$4,250	13.60%	\$5,250	14.58%	\$8,250	0.53%	\$10,250	1.70%				
2021	LW High Deduct	\$4,250	8.91%	\$5,250	10.21%	\$8,250	0.72%	\$10,250	1.32%				

	Individuals and Families in Standard CDHP (2014—2018) and LW Basic CDHP (2019-Present)													
			Indiv	iduals		Families								
Plan year	Plan Name	Deductible	Meeting De- ductible	MOOP	Meeting MOOP	Deductible	Meeting De- ductible	MOOP	Meeting MOOP					
2014	Standard CDHP	\$1,750	20.45%	\$3,500	7.38%	\$3,500	2.41%	\$7,000	0.47%					
2015	Standard CDHP	\$1,750	18.67%	\$3,500	6.90%	\$3,500	1.88%	\$7,000	0.34%					
2016	Standard CDHP	\$1,750	19.69%	\$3,500	7.96%	\$3,500	2.17%	\$7,000	0.47%					
2017	Standard CDHP	\$1,750	16.92%	\$3,750	6.35%	\$3,500	2.38%	\$7,500	0.42%					
2018	Standard CDHP	\$1,750	17.68%	\$3,750	6.66%	\$3,500	2.73%	\$7,500	0.77%					
2019	LW Basic CDHP	\$1,750	17.36%	\$3,750	6.41%	\$3,500	3.22%	\$7,500	0.52%					
2020	LW Basic CDHP	\$2,000	15.25%	\$4,000	5.31%	\$3,750	3.23%	\$7,750	0.66%					
2021	LW Basic CDHP	\$2,000	7.78%	\$4,000	2.77%	\$3,750	1.27%	\$7,750	0.31%					

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out-of-Pocket

Expenses (continued)
The following details the number of individuals and families by Health Plan that met their deductibles and/or maximum out-of-pocket (MOOP) expense for the years 2014-2021 This report is based on Incurred Medical and Pharmacy claims.

	Individuals and Families in LivingWell PPO (2014—Present)												
			Individ		Families								
Plan year	Plan Name	Deductible	Meeting De- ductible	MOOP	Meeting MOOP	Deductible	Meeting Deductible	MOOP	Meeting MOOP				
2014	LivingWell PPO	\$500	11.85%	\$2,500	3.74%	\$1,000	4.70%	\$3,000	0.49%				
2015	LivingWell PPO	\$500	34.97%	\$2,500	0.69%	\$1,000	7.88%	\$5,000	0.16%				
2016	LivingWell PPO	\$500	35.87%	\$2,500	0.65%	\$1,000	7.87%	\$5,000	0.13%				
2017	LivingWell PPO	\$750	32.00%	\$2,750	0.65%	\$1,500	6.38%	\$5,500	0.08%				
2018	LivingWell PPO	\$750	32.74%	\$2,750	0.74%	\$1,500	6.38%	\$5,500	0.07%				
2019	LivingWell PPO	\$750	33.92%	\$2,750	0.67%	\$1,500	6.66%	\$5,500	0.07%				
2020	LivingWell PPO	\$1,000	25.07%	\$3,000	0.86%	\$1,750	5.49%	\$5,750	0.08%				
2021	LivingWell PPO	\$1,000	17.11%	\$3,000	0.66%	\$1,750	2.76%	\$5,750	0.03%				

	Individuals and Families in LivingWell CDHP (2014— Present)												
			Indivi	duals		Families							
Plan year	Plan Name	Deductible	Meeting De- ductible	MOOP	Meeting MOOP	Deductible	Meeting De- ductible	MOOP	Meeting MOOP				
2014	LivingWell CDHP	\$1,250	29.04%	\$2,500	8.89%	\$2,500	17.39%	\$5,000	2.24%				
2015	LivingWell CDHP	\$1,250	29.30%	\$2,500	8.61%	\$2,500	17.55%	\$5,000	1.89%				
2016	LivingWell CDHP	\$1,250	28.69%	\$2,500	9.17%	\$2,500	17.90%	\$5,000	2.35%				
2017	LivingWell CDHP	\$1,250	28.23%	\$2,750	8.51%	\$2,500	17.56%	\$5,500	2.59%				
2018	LivingWell CDHP	\$1,250	28.80%	\$2,750	8.97%	\$2,500	18.48%	\$5,500	3.04%				
2019	LivingWell CDHP	\$1,250	29.38%	\$2,750	9.48%	\$2,500	33.26%	\$5,500	3.19%				
2020	LivingWell CDHP	\$1,500	21.95%	\$3,000	8.61%	\$2,750	14.99%	\$5,750	3.15%				
2021	LivingWell CDHP	\$1,500	15.04%	\$3,000	4.44%	\$2,750	7.72%	\$5,750	1.42%				

Premium

The following details the amount of premium* paid by the employee and employer for 2014-2020 and monthly through 2021.

Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount		
2014	\$265,431,508	\$1,348,631,926	\$1,614,063,434		
2015	\$256,371,746	\$1,362,686,924	\$1,619,058,670		
2016	\$254,661,768	\$1,380,830,820	\$1,635,492,588		
2017	\$255,169,294	\$1,374,862,647	\$1,630,031,942		
2018	\$262,595,375	\$1,384,164,265	\$1,646,759,641		
2019	\$265,841,372	\$1,373,033,885	\$1,638,875,257		
2020	\$276,675,312	\$1,364,377,186	\$1,641,052,498		
Jan 2021	\$23,551,167	\$116,021,140	\$139,572,307		
Feb 2021	\$23,546,142	\$115,832,587	\$139,378,729		
Mar 2021	\$23,541,940	\$115,772,356	\$139,314,296		
Apr 2021	\$23,456,256	\$115,495,487	\$138,951,743		
May 2021	\$23,391,895	\$115,271,852	\$138,663,747		
Jun 2021	\$23,351,387	\$115,005,880	\$138,357,267		
Jul 2021	\$23,247,960	\$114,404,638	\$137,652,598		
Aug 2021	\$23,152,451	\$113,493,600	\$136,646,052		
Sep 2021	\$23,111,486	\$113,073,057	\$136,184,543		

^{*}Premium is based on enrollment using published premium rates—it is NOT based on actual payments received.

The following details the type of prescription filled, the percent that were generic, and the generic efficiency percentage for the most recent rolling year. Based on Paid Pharmacy Claims.

Time Period: Paid Month	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx**
Oct 2020	285,429	5,779	54,674	11,571	357,453	79.85%	98.02%
Nov 2020	279,863	5,572	37,900	10,249	333,584	83.90%	98.05%
Dec 2020	301,789	6,120	36,311	11,777	355,997	84.77%	98.01%
Jan 2021	274,725	3,867	25,257	10,059	313,908	87.52%	98.61%
Feb 2021	248,989	4,157	34,785	10,279	298,210	83.49%	98.36%
Mar 2021	300,987	5,007	52,422	14,908	373,324	80.62%	98.36%
Apr 2021	282,780	4,832	41,924	12,721	342,257	82.62%	98.32%
May 2021	277,278	4,618	34,559	12,044	328,499	84.41%	98.36%
Jun 2021	299,720	4,898	35,095	13,205	352,918	84.93%	98.39%
Jul 2021	286,085	4,872	32,391	13,494	336,842	84.93%	98.33%
Aug 2021	289,908	5,019	37,848	15,937	348,712	83.14%	98.30%
Sep 2021	285,519	5,005	44,224	14,589	349,337	81.73%	98.28%

^{*}Other category includes: Over-the-Counter (usually items such as diabetic supplies, syringes, and test strips, etc.) and claims that were unable to be tagged to a specific group.

^{**}Generic Efficiency Rate means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Pharmacy Claims.

Time Period	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt* Per Script	Net Pay Per Script	Member Cost Per Script**	Patient Cost Per Script***
Jul 2020	264,578	156,936	339,673	1.28	2.84	\$146.97	\$132.45	\$18.11	\$30.52
Aug 2020	262,892	152,899	329,076	1.25	2.81	\$147.45	\$133.76	\$16.65	\$28.63
Sep 2020	261,176	155,776	338,876	1.30	2.80	\$146.40	\$134.00	\$15.68	\$26.29
Oct 2020	263,509	168,674	358,541	1.36	2.81	\$141.82	\$130.32	\$15.11	\$23.61
Nov 2020	263,459	157,022	331,292	1.26	2.79	\$150.10	\$138.40	\$13.99	\$23.48
Dec 2020	263,076	154,329	355,796	1.35	2.97	\$152.58	\$141.15	\$14.64	\$24.96
Jan 2021	262,533	157,392	315,764	1.20	2.73	\$144.17	\$121.53	\$27.24	\$45.43
Feb 2021	262,148	150,677	300,120	1.14	2.61	\$146.69	\$126.27	\$23.38	\$40.67
Mar 2021	262,161	164,522	371,901	1.42	2.85	\$142.62	\$124.89	\$25.15	\$40.08
Apr 2021	261,566	159,152	342,883	1.31	2.74	\$150.97	\$134.26	\$21.91	\$36.01
May 2021	261,143	152,920	328,409	1.26	2.71	\$151.69	\$135.81	\$19.98	\$34.11
Jun 2021	260,738	157,249	350,579	1.34	2.84	\$151.20	\$136.08	\$20.32	\$33.70

^{*&}quot;Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.

^{**&}quot;Member Cost per Script" is the average net amount paid per prescription filled per member (Net Pay Rx/Members)

^{***&}quot;Patient Cost per Script" is the average net amount paid per prescription filled per Patients (Net Pay Rx/Patients)

The following Top 25 Drug Analysis is based on Incurred Pharmacy Claims from Jan—Jun 2021.

Prev Rank	Curr Rank	Product Name*	Brand/Generic	Therapeutic Class General	Net Pay Rx	Net Pay Rx as % of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	1	HUMIRA	Single source brand	Immunosuppressants	\$20,738,691.59	8.12%	2,515	\$223.97	686
2	2	STELARA	Single source brand	Immunosuppressants	\$10,818,029.62	4.24%	548	\$312.81	232
3	3	TRULICITY	Single source brand	Hormones & Synthetic Subst	\$6,980,620.08	2.73%	7,028	\$26.85	1,893
4	4	SAXENDA	Single source brand	Hormones & Synthetic Subst	\$6,029,194.01	2.36%	4,811	\$37.03	1,750
5	5	ENBREL	Single source brand	Immunosuppressants	\$5,267,170.67	2.06%	630	\$192.06	221
6	6	FARXIGA	Single source brand	Hormones & Synthetic Subst	\$4,984,302.00	1.95%	6,657	\$15.56	2,212
7	7	JARDIANCE	Single source brand	Hormones & Synthetic Subst	\$4,761,867.42	1.87%	6,272	\$16.04	2,082
8	8	JANUVIA	Single source brand	Hormones & Synthetic Subst	\$4,612,779.68	1.81%	6,576	\$14.47	2,248
9	9	NOVOLOG	Single source brand	Hormones & Synthetic Subst	\$4,004,462.18	1.57%	3,574	\$25.64	1,169
10	10	TRIKAFTA	Single source brand	Respiratory Tract Agents	\$3,901,193.92	1.53%	168	\$829.34	29
11	11	DUPIXENT	Single source brand	Immunosuppressants	\$3,676,547.24	1.44%	1,395	\$88.71	315
12	12	XARELTO	Single source brand	Blood Form/Coagul Agents	\$3,644,117.67	1.43%	5,932	\$13.94	2,021
13	13	OZEMPIC 1 MG DOSES	Single source brand	Hormones & Synthetic Subst	\$3,557,274.52	1.39%	3,288	\$26.86	1,019
15	14	SKYRIZI	Single source brand	Immunosuppressants	\$3,385,591.53	1.33%	208	\$217.22	108
14	15	NOVOLOG FLEXPEN	Single source brand	Hormones & Synthetic Subst	\$3,351,117.68	1.31%	3,386	\$23.04	1,382
16	16	COSENTYX	Single source brand	Immunosuppressants	\$3,125,273.21	1.22%	438	\$205.89	117
17	17	BASAGLAR KWIKPEN	Single source brand	Hormones & Synthetic Subst	\$3,090,871.71	1.21%	6,353	\$10.90	2,306
18	18	ROSUVASTATIN CALCI- UM	Multisource generic	Cardiovascular Agents	\$2,869,049.76	1.12%	17,750	\$2.68	7,652
19	19	OZEMPIC 0.25 MG OR 0.5 MG DOSES	Single source brand	Hormones & Synthetic Subst	\$2,864,298.56	1.12%	2,853	\$25.47	1,073
20	20	OTEZLA	Single source brand	Misc Therapeutic Agents	\$2,732,053.25	1.07%	700	\$107.20	223
21	21	VICTOZA	Single source brand	Hormones & Synthetic Subst	\$2,621,321.56	1.03%	2,304	\$27.80	699
22	22	GILENYA	Single source brand	Misc Therapeutic Agents	\$2,394,015.05	0.94%	144	\$285.00	50
24	23	NORDITROPIN FLEXPRO	Multisource brand, no generic	Hormones & Synthetic Subst	\$2,374,180.41	0.93%	300	\$208.77	94
23	24	TALTZ	Single source brand	Immunosuppressants	\$2,345,106.32	0.92%	325	\$218.31	86
25	25	LEVEMIR FLEXTOUCH	Single source brand	Hormones & Synthetic Subst	\$2,167,781.63	0.85%	2,961	\$16.91	1,061

^{*&}quot;Product Name" includes all strengths/formulations of a drug.

In summary, the top 25 drugs represent 4.42% of total scripts and 45.56% of total Pharmacy expenditures.

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$116,296,911	87,116	3,890,086
All Product Names	\$255,284,285	1,972,575	78,034,415
Top Drugs as Pct of All Drugs	45.56%	4.42%	4.99%

Utilization

The top 25 clinical conditions based on Incurred Medical Claims for Jan—Jun 2021.

Prev Rank	Curr Rank	Clinical Condition	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER	Patients Med	Net Pay Per Pat Med
1	1	Prevent/Admin Hlth Encounters	\$40,610,538	\$250,755	\$40,330,114	0.00	0.00	1269.42	0.68	128,382	\$316.33
2	2	Chemotherapy Encounters	\$23,046,836	\$1,756,033	\$21,290,804	0.47	5.52	1.70	0.00	621	\$37,112.46
4	3	Osteoarthritis	\$20,697,837	\$2,233,207	\$18,455,465	0.47	1.58	141.81	0.30	11,382	\$1,818.47
5	4	Signs/Symptoms/Oth Cond, NEC	\$18,070,776	\$2,525,710	\$15,422,108	0.76	9.29	369.26	9.32	50,729	\$356.22
3	5	Infections, NEC	\$17,544,579	\$11,105,794	\$6,432,006	0.21	6.48	324.34	2.70	46,883	\$374.22
6	6	Coronary Artery Disease	\$16,995,448	\$10,300,527	\$6,688,883	1.70	4.33	25.60	1.78	3,199	\$5,312.74
8	7	Pregnancy without Delivery	\$15,982,307	\$12,455,936	\$3,525,818	0.55	3.07	90.05	5.30	3,825	\$4,178.38
9	8	Spinal/Back Disord, Low Back	\$14,932,064	\$6,068,047	\$8,847,526	0.70	2.95	584.64	3.41	20,101	\$742.85
7	9	Infections - Respiratory, NEC	\$14,681,427	\$9,810,235	\$4,845,609	2.49	5.88	162.30	9.97	21,305	\$689.11
11	10	Arthropathies/Joint Disord NEC	\$12,484,392	\$1,336,385	\$11,139,955	0.18	4.33	628.60	5.65	32,136	\$388.49
10	11	Gastroint Disord, NEC	\$11,947,157	\$3,163,967	\$8,781,105	0.97	4.57	113.96	14.31	17,355	\$688.40
13	12	Newborns, w/wo Complication	\$10,560,431	\$10,275,550	\$284,785	9.36	3.15	9.51	0.16	1,547	\$6,826.39
12	13	Respiratory Disord, NEC	\$10,445,275	\$3,393,072	\$6,962,110	0.28	3.81	71.21	7.72	13,217	\$790.29
14	14	Cardiac Arrhythmias	\$10,088,296	\$3,226,949	\$6,856,699	0.60	3.12	33.92	1.81	4,444	\$2,270.09
16	15	Condition Rel to Tx - Med/Surg	\$8,959,922	\$5,358,973	\$3,595,449	1.22	5.48	6.08	1.83	2,828	\$3,168.29
17	16	Radiation Therapy Encounters	\$8,660,782	\$39,677	\$8,621,105	0.01	19.00	3.78	0.00	259	\$33,439.31
15	17	Diabetes	\$8,646,530	\$2,108,514	\$6,397,853	1.77	6.26	226.70	1.90	22,932	\$377.05
18	18	Cancer - Breast	\$7,362,729	\$296,809	\$7,032,132	0.06	5.88	22.75	0.03	1,655	\$4,448.78
20	19	Cardiovasc Disord, NEC	\$6,322,725	\$978,607	\$5,340,043	0.33	5.77	72.64	8.31	10,485	\$603.03
24	20	Spinal/Back Disord, Ex Low	\$6,305,454	\$1,183,743	\$5,121,625	0.17	3.68	533.53	2.32	16,576	\$380.40
21	21	Neurological Disorders, NEC	\$6,239,911	\$2,074,920	\$4,139,453	0.53	8.93	67.45	1.31	5,596	\$1,115.07
19	22	Rheumatic Fever/Valvular Dis	\$6,163,603	\$5,151,428	\$1,011,700	0.44	6.02	6.09	0.05	1,617	\$3,811.75
23	23	Overweight/Obesity	\$5,965,891	\$4,850,811	\$1,114,619	1.63	1.64	38.54	0.00	3,987	\$1,496.34
25	24	Cholecystitis/Cholelithiasis	\$5,917,509	\$1,261,179	\$4,656,246	0.51	3.43	3.84	1.55	997	\$5,935.31
22	25	Renal Function Failure	\$5,736,794	\$1,056,802	\$4,678,810	0.11	5.73	15.68	0.58	1,980	\$2,897.37

NOTE: Medical payments represent only the payments made for the specified condition.

<u>Utilization</u> (continued)

In Summary, the top clinical conditions represent more than 59.69% of total Paid Medical Claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$314,369,212	\$102,263,629	\$211,572,021	25.51	5.20	4,823.41	80.97
All Clinical Conditions	\$526,654,835	\$160,553,726	\$364,793,035	56.02	5.09	9,231.36	176.30
Top Clinical Conditions as Pct of All Clinical Conditions	59.69%	63.69%	58.00%	45.53%	102.04%	52.25%	45.92%

Claims Lag Analysis

The following claims lag information is based on Incurred Medical Claims from Jan—Jun 2021.

Plan	Number of Medical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
LivingWell CDHP	2,471,466	19	87.11%	96.18%	99.09%
LivingWell PPO	1,528,817	19	87.23%	96.35%	99.12%
LW Limited High Deductible	22,283	27	78.55%	92.75%	97.64%
LivingWell Basic CDHP	141,651	20	85.09%	95.20%	98.83%
Missing	12,290	27	76.73%	94.25%	97.79%
All Plans	4,176,507	19	86.92%	96.14%	99.05%

^{*}Missing means the claims could not be tagged to a specific plan.

Claims Lag Analysis (continued)

The following claims lag information is based on all claims (Medical and Pharmacy) incurred and paid during the most recent rolling year.

	Month Paid							
Service Month	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021		
Jul 2020	\$5,667,643.45	\$2,141,609.06	\$912,808.49	\$922,225.75	\$430,877.56	\$272,886.55		
Aug 2020	\$22,140,151.62	\$5,211,529.71	\$3,590,369.24	\$1,836,078.33	\$577,539.31	\$845,530.02		
Sep 2020	\$46,844,720.65	\$26,730,256.00	\$7,154,189.71	\$2,165,937.01	\$2,076,893.39	\$951,080.94		
Oct 2020	\$57,971,312.89	\$53,127,740.30	\$27,158,978.00	\$5,848,903.58	\$2,573,122.86	\$1,031,753.50		
Nov 2020	\$7,891.97	\$54,250,795.76	\$61,954,319.53	\$14,028,782.97	\$5,790,067.80	\$3,441,330.30		
Dec 2020	\$0.00	\$24,549.70	\$69,486,000.49	\$54,812,866.75	\$25,170,533.66	\$8,488,489.14		
Jan 2021	\$0.00	\$0.00	\$21,355.71	\$43,353,693.98	\$41,496,897.80	\$23,390,415.75		
Feb 2021	\$0.00	\$0.00	\$0.00	\$32,011.52	\$44,017,713.78	\$46,570,907.53		
Mar 2021	\$0.00	\$0.00	\$0.00	\$0.00	\$24,631.07	\$61,418,372.80		
Apr 2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10,809.20		
May 2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Jun 2021	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

	Month Paid							
Service Month	Apr 2021	May 2021	Jun 2021	Jul 2021	Aug 2021	Sep 2021		
Jul 2020	\$75,993.86	(\$58,093.05)	\$142,663.89	\$90,441.48	\$40,884.89	\$11,798.88		
Aug 2020	\$29,043.37	\$200,793.92	\$292,334.22	\$100,575.87	\$141,301.03	\$32,910.73		
Sep 2020	\$261,054.24	\$21,223.42	\$92,773.95	(\$139,044.81)	\$230,990.46	\$29,935.91		
Oct 2020	\$924,818.91	\$492,573.35	\$927,340.72	\$200,307.71	\$105,330.28	\$79,226.03		
Nov 2020	\$1,420,538.27	\$297,770.66	\$338,073.56	\$96,161.64	\$289,130.98	\$1,050,678.89		
Dec 2020	\$2,620,515.19	\$1,421,137.13	\$1,428,350.36	\$602,252.91	\$141,384.87	\$288,317.01		
Jan 2021	\$5,485,168.60	\$2,126,188.94	\$2,053,673.70	\$846,112.92	\$1,188,678.82	\$759,864.60		
Feb 2021	\$14,069,042.32	\$3,897,398.04	\$3,933,091.79	\$1,507,695.93	\$2,977,311.84	\$142,561.91		
Mar 2021	\$47,821,507.26	\$17,326,973.30	\$4,965,186.41	\$1,729,849.51	\$1,810,288.81	\$745,168.16		
Apr 2021	\$55,291,713.52	\$46,402,539.63	\$24,396,209.87	\$3,890,905.65	\$2,772,636.86	\$1,213,564.80		
May 2021	\$7,675.10	\$51,803,070.76	\$52,414,740.00	\$20,256,184.95	\$6,319,435.85	\$1,539,797.05		
Jun 2021	\$0.00	\$36,542.50	\$65,406,767.19	\$55,179,864.04	\$19,100,424.82	\$5,072,830.71		

Claims Distribution Based on Age/Gender

The following is based on Incurred Medical and Pharmacy Claims from Jan—Jun 2021.

		Female		Male			
Age Group	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member	
Ages < 1	1,047	\$6,280,120.50	\$5,997.25	1,056	\$9,772,517.53	\$9,255.74	
Ages 1-4	4,946	\$6,213,050.10	\$1,256.13	5,218	\$5,219,742.94	\$1,000.37	
Ages 5-9	7,593	\$7,997,905.18	\$1,053.40	7,969	\$6,396,980.65	\$802.73	
Ages 10-14	9,200	\$9,625,096.54	\$1,046.19	9,656	\$10,407,267.37	\$1,077.80	
Ages 15-17	6,274	\$10,495,375.15	\$1,672.93	6,383	\$8,182,789.49	\$1,281.97	
Ages 18-19	4,058	\$6,453,281.71	\$1,590.39	4,150	\$4,358,968.08	\$1,050.27	
Ages 20-24	10,286	\$19,789,254.82	\$1,923.96	9,886	\$10,983,469.15	\$1,110.99	
Ages 25-29	8,223	\$19,125,404.72	\$2,325.84	4,949	\$6,517,015.54	\$1,316.92	
Ages 30-34	8,780	\$22,112,414.79	\$2,518.40	5,005	\$6,724,509.24	\$1,343.60	
Ages 35-39	10,714	\$29,486,851.42	\$2,752.18	6,291	\$10,878,945.15	\$1,729.38	
Ages 40-44	12,371	\$39,944,562.75	\$3,228.80	7,494	\$14,994,476.96	\$2,001.00	
Ages 45-49	13,702	\$49,759,382.57	\$3,631.54	8,709	\$26,316,199.11	\$3,021.72	
Ages 50-54	15,253	\$64,170,199.14	\$4,206.96	9,915	\$37,675,081.43	\$3,799.87	
Ages 55-59	16,650	\$77,331,798.31	\$4,644.51	10,641	\$54,033,506.48	\$5,078.02	
Ages 60-64	18,676	\$96,624,868.39	\$5,173.88	11,329	\$72,001,006.23	\$6,355.65	
Ages 65-74	2,663	\$16,015,970.62	\$6,014.26	2,287	\$18,737,003.70	\$8,194.62	
Ages 75-84	163	\$1,168,028.52	\$7,173.15	165	\$1,888,148.34	\$11,420.25	
Ages 85+	2	\$1,592.44	\$796.22	10	\$28,976.34	\$2,946.75	
Total	150,601	\$482,595,157.67	\$3,204.47	111,111	\$305,116,603.73	\$2,746.06	

Allowed Amount Distribution by Member Count

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2014—2020 and year to date for 2021.

Allowed Amount	2014	2015	2016	2017	2018	2019	2020	2021
less than 0.00	22	4	2	1	5	19	8	0
\$0.00 - \$499.99	66,180	72,760	72,608	71,180	69,962	67,326	72,546	95,576
\$500.00 - \$999.99	39,137	39,862	40,982	41,563	42,897	41,393	41,374	38,497
\$1,000.00 - \$1,999.99	43,065	41,247	40,963	42,085	43,484	43,528	42,219	34,025
\$2,000.00 - \$4,999.99	51,911	49,217	48,716	49,648	50,026	50,761	47,735	33,321
\$5,000.00 - \$9,999.99	29,515	26,834	27,302	26,817	27,360	27,909	25,275	16,536
\$10,000.00 - \$14,999.99	12,825	11,369	11,647	12,107	12,430	12,825	11,975	6,602
\$15,000.00 - \$19,999.99	6,755	5,605	6,152	6,389	6,799	7,361	7,119	3,449
\$20,000.00 - \$29,999.99	6,374	5,612	5,909	6,229	6,841	7,132	7,011	3,512
\$30,000.00 - \$49,999.99	5,272	4,475	4,841	5,064	5,389	5,955	5,606	3,258
\$50,000.00 - \$74,999.99	2,520	2,225	2,347	2,673	2,779	3,014	2,878	1,295
\$75,000.00 - \$99,999.99	1,037	944	1,115	1,201	1,329	1,455	1,420	593
\$100,000.00 - \$149,999.99	846	777	886	959	1,046	1,164	1,215	495
\$150,000.00 - \$199,999.99	344	320	330	369	442	507	481	221
\$200,000.00 - \$249,999.99	179	148	174	168	206	213	253	95
over \$249,999.99	326	231	252	292	318	398	466	110
Total	266,308	261,630	264,226	266,745	271,313	270,960	267,581	237,585

Summary of Enrollment and Claims

The following provides a summary of members, Incurred Medical Claims and Incurred Pharmacy Claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Jul 2020	264,578	\$144,848,613.40	\$99,859,998.80	\$44,988,614.60	676,315	329,050	339,673
Aug 2020	262,892	\$141,863,508.74	\$97,845,256.13	\$44,018,252.61	641,828	305,085	329,076
Sep 2020	261,176	\$144,594,510.29	\$99,183,529.91	\$45,410,980.38	650,339	303,306	338,876
Oct 2020	263,509	\$150,491,311.34	\$103,766,026.78	\$46,725,284.56	703,206	336,473	358,541
Nov 2020	263,459	\$142,976,274.77	\$97,125,496.79	\$45,850,777.98	649,345	310,584	331,292
Dec 2020	263,076	\$164,488,339.20	\$114,266,421.94	\$50,221,917.26	687,217	323,782	355,796
Jan 2021	262,533	\$121,457,643.03	\$83,084,369.55	\$38,373,273.48	642,307	319,028	315,764
Mar 2021	262,161	\$136,201,068.34	\$89,755,868.82	\$46,445,199.52	721,998	341,761	371,901
Feb 2021	262,148	\$117,393,854.56	\$79,497,863.31	\$37,895,991.25	574,863	267,217	300,120
Apr 2021	261,566	\$134,217,220.41	\$88,182,725.92	\$46,034,494.49	664,986	313,501	342,883
May 2021	261,143	\$132,542,031.05	\$87,941,640.08	\$44,600,390.97	622,991	286,258	328,409
Jun 2021	260,738	\$145,899,944.01	\$98,192,367.32	\$47,707,576.69	681,611	322,402	350,579

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes Medical and Pharmacy) by rolling year.

Time Period	Members	Total Medical and Rx Claims	Total Medical Claims	Total Rx Claims
Jul 2020 - Jun 2021	262,415	\$1,683,046,891	\$1,144,761,813	\$538,285,078
Jul 2019 - Jun 2020	264,352	\$1,583,405,661	\$1,072,893,345	\$510,512,316
% Change (Roll Yrs)	-0.73%	6.29%	6.70%	5.44%

Appendix A

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan for members of the Kentucky Group Health Insurance Board (KGHIB).

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

This report is compiled using Advantage Suite, which is DEI's health insurance information management system. IBM Watson Health warehouses enrollment and claims data on behalf of the KEHP. Enrollment data is provided by DEI while claims data is provided by KEHP's Medical and Pharmacy administrators

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding and dropping dependents, marriage, divorce, Medicare eligibility, etc. Therefore, Advantage Suite is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2019, Advantage Suite processed enrollment information for a total of 263,771 members as well as 8,140,840 claims (3,671,772 Medical claims and 4,372,489 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Advantage Suite.

Appendix B—Definitions

- *Allowed Amount* is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- Carrier refers to claims listed by carrier. (Please note that CVS data is designated as Anthem).
- *Days Supply* is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- *Employee* represents an individual eligible to participate in KEHP as a retiree, or by being employed by one of the agencies that participate with KEHP (example: state employee, school board, quasi agency, etc.). Employee may also be referred to as "planholder" or "contracts". Please note that Advantage Suite deals with Cross-Reference plans uniquely. Although there are in fact two "employees" Advantage Suite can only designate the planholder as an employee. Therefore, the Cross-Reference spouse is considered a dependent and all claims and utilization data related to that spouse is counted as a "member".
- *Generic Efficiency* means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- *Group* is Kentucky Retirement System (KRS), Kentucky Teachers' Retirement System (TRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, and Quasi/Local Governments).
- Incurred Claims refer to paid amounts for claims that were incurred in a specified timeframe.
- *IP* refers inpatient procedures and/or claims.
- **LOS** refers to length of stay of an acute admission.
- *Mail Order* is computed as any script filled with a "days supply" of more than 30 days, regardless of the physical location where the prescription was filled.
- *Member* includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as "covered lives".
- *Member Cost per Script* is the average net amount paid per prescription filled per member (Net Pay Rx/Members).
- *Net Payment* is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- *OOP* is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- **OP** refers to outpatient procedures and/or claims.
- *OP Rad* refers to outpatient radiology claims an/or patients.
- Paid Claims specify the paid amount for claims regardless of when the claims may have been incurred.
- Patient Cost per Script is the average net amount paid per prescription filled per patient (Net Pay Rx/Patients).
- *Patients* is the unique count of members who received facility, professional, or pharmacy services.
- Plan is Standard PPO, Standard CDHP, LivingWell Basic CDHP, LW High Deductible Plan, LivingWell PPO and Liv-

- ingWell CDHP.
 Rcnt SGovt refers to recent State Government benchmarks.
 Rcnt US refers to recent US national benchmarks.
- Retail is computed as any script filled with a "days supply" of 30 days or less, regardless of the physical location where the prescription was filled.